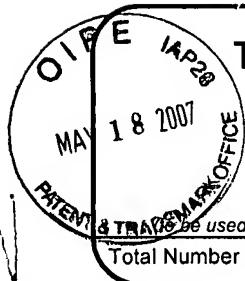


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## TRANSMITTAL FORM

*(This form is to be used for all correspondence after initial filing.)*

Total Number of Pages in This Submission

Application Number	10/672,086
Filing Date	September 26, 2003
First Named Inventor	Pantas Sutardja
Art Unit	2133
Examiner Name	Shelly A. Chase
Total Number of Pages in This Submission	Attorney Docket Number
	MP0277

### ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):  Comments on Statement of Reasons for Allowance (2 pgs); Fee Transmittal Form duplicate; and return receipt postcard.
Remarks		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm	Harness, Dickey & Pierce, P.L.C.		
Signature			
Printed Name	Michael D. Wiggins		
Date	May 18, 2007	Reg. No.	34,754

### CERTIFICATE OF TRANSMISSION/MAILING

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Signature		Date	May 18, 2007

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**EV 755 416 523 US**



**PATENT**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Application No.: 10/672,086

Filing Date: September 26, 2003

Applicant: Pantas Sutardja et al.

Group Art Unit: 2133

Examiner: Shelly A. Chase

Title: MARKING UNRELIABLE SYMBOLS IN A HARD DISK  
DRIVE READ BACK SIGNAL

Attorney Docket: MP0277

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**COMMENTS ON STATEMENT OF REASONS FOR ALLOWANCE**

Reasons for allowance are only warranted in instances in which "the record of the prosecution as a whole does not make clear the Examiner's reasons for allowing a claim or claims." 37 C.F.R. 1.104(e). In the present case, Applicant believes the record as a whole makes clear the reasons for allowance and therefore no statement by the Examiner is necessary or warranted. Therefore, the record should reflect that Applicant does not necessarily agree with the statement in the reasons for allowance.

For example, the Examiner loosely paraphrases portions of various claims in the Statement of Reasons for Allowance. The quoted language may not exactly correspond to any of the allowed independent claims.

Applicant's claims should be limited only by the terms utilized therein. Thus, Applicant hereby submits these Comments in an effort to ensure that the claims are properly construed based only upon limitations that are actually present therein and/or to ensure that the claims are not interpreted so as to include any additional claim limitations that are not found in the respective claims.

Additionally, Applicants do not necessarily agree with the Examiner to the extent that the Examiner has commented on what the prior art shows or does not show in the Statement of Reasons for Allowance.

Should there be any outstanding matters that need to be resolved in the present application the Examiner is respectfully requested to contact the undersigned. If necessary, the Commissioner is hereby authorized in this, concurrent, and future replies, to charge payment or credit any overpayment to Deposit Account No. 08-0750 for any additional fees required under 37 C.F.R. § 1.16 or under 37 C.F.R. § 1.17; particularly, extension of time fees.

Respectfully submitted,

Dated: May 18, 2007

By:   
Michael D. Wiggins  
Reg. No. 34,754

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